

West Chester University

## Digital Commons @ West Chester University

---

Literacy Student Work

Literacy

---

4-29-2021

# The Evaluation of a Soft Skills Curriculum in Athletic Training Education: A Mixed Methods Study

Emily Duckett

*West Chester University of Pennsylvania*

Follow this and additional works at: [https://digitalcommons.wcupa.edu/liter\\_stuwork](https://digitalcommons.wcupa.edu/liter_stuwork)



Part of the [Exercise Science Commons](#), and the [Higher Education Commons](#)

---

### Recommended Citation

Duckett, E. (2021). The Evaluation of a Soft Skills Curriculum in Athletic Training Education: A Mixed Methods Study. Retrieved from [https://digitalcommons.wcupa.edu/liter\\_stuwork/3](https://digitalcommons.wcupa.edu/liter_stuwork/3)

This Poster is brought to you for free and open access by the Literacy at Digital Commons @ West Chester University. It has been accepted for inclusion in Literacy Student Work by an authorized administrator of Digital Commons @ West Chester University. For more information, please contact [wcreator@wcupa.edu](mailto:wcreator@wcupa.edu).

# The Evaluation of a Soft Skills Curriculum in Athletic Training Education: A Mixed Methods Study

EMILY A. DUCKETT, EDD, LAT, ATC

WEST CHESTER UNIVERSITY OF PENNSYLVANIA

RESEARCH DAY

APRIL 29TH, 2021

# Objectives

---



## **Introduction**

Purpose

Research  
Questions



## **Methodology**

Participants

Description of  
Setting

Procedures

Instruments



## **Results**

Quantitative

Results

Qualitative

Results



## **Discussion**

Discussion  
of Results

Implications

# Introduction

- In healthcare, soft skills include: ethics, attitudes, interpersonal abilities, communication, and lifelong learning (Joubert et al., 2006).
- Pre-professional healthcare students should have the opportunity to learn and practice soft skills to build foundational behaviors of professional practice prior to clinical experience.
- A top priority of healthcare is quality patient-centered care
- Foundational behaviors of professional practice (National Athletic Trainers' Association, 2011)

## ATHLETIC TRAINING EDUCATION COMPETENCIES

5<sup>th</sup> Edition  
Released 2011



# Empathy & Compassion



**EMPATHY**



**COMPASSION**



# Benefits of Empathy & Compassion in Healthcare

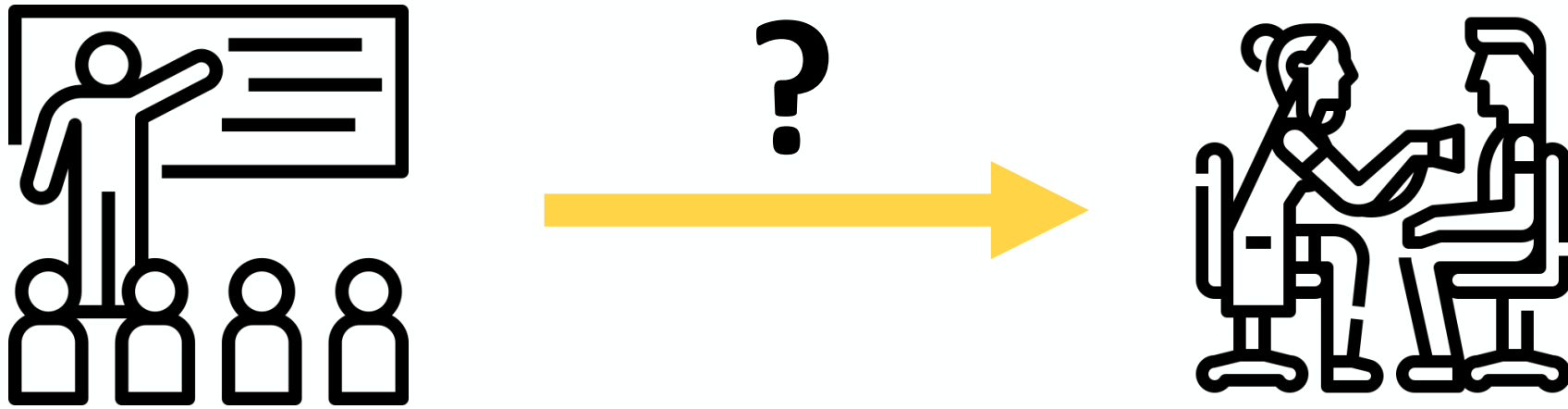
---

1. ↑ patient compliance (DiMatteo et al., 1993)
2. More accurate prognosis (Dubnicki, 1977)
3. ↑ patient satisfaction (Zachariae, 2003)
4. ↓ anxiety, depression and hostility in cancer patients (LaMonica, 1987)
5. Optimal physiological outcomes in diabetic patients (Hojat, 2011)
6. Improved patient adherence, satisfaction and treatment outcomes (Rattka, 2018)
7. Activation of the parasympathic nervous system (Trzeciak & Mazzairelli, 2019)
8. Psychological health benefits: trust building and cultivating hope (Trzeciak & Mazzairelli, 2019)
9. Scientific evidence to support the effects of compassion on **provider well-being, employee engagement, and organizational performance**

# Purpose of Study

---

The purpose of this study was to investigate the ways in which pre-professional athletic training students' transfer knowledge from a soft skills curriculum during a didactic preprofessional course to clinical practice during their clinical experience.



# Research Questions

1. How does a pre-professional soft skills curriculum associate with students' development of empathy?

2. How does a pre-professional soft skills curriculum associate with students' development of compassion?

1. In what ways do athletic training students perceive they transferred soft skills into clinical practice?

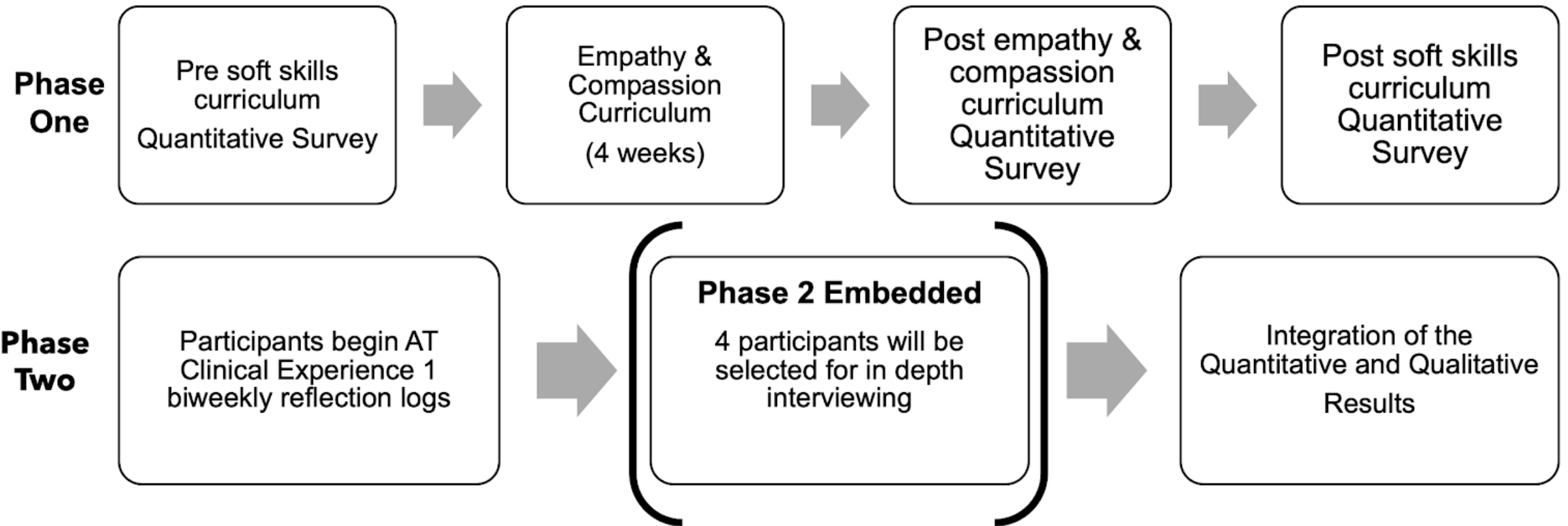
2. In what ways are the development of soft skills associated with athletic training students' subjective well-being?

1. How do athletic training students describe their emotional response to utilizing soft skills during clinical practice?

2. In what ways are the development of soft skills associated with athletic training students' subjective well-being?



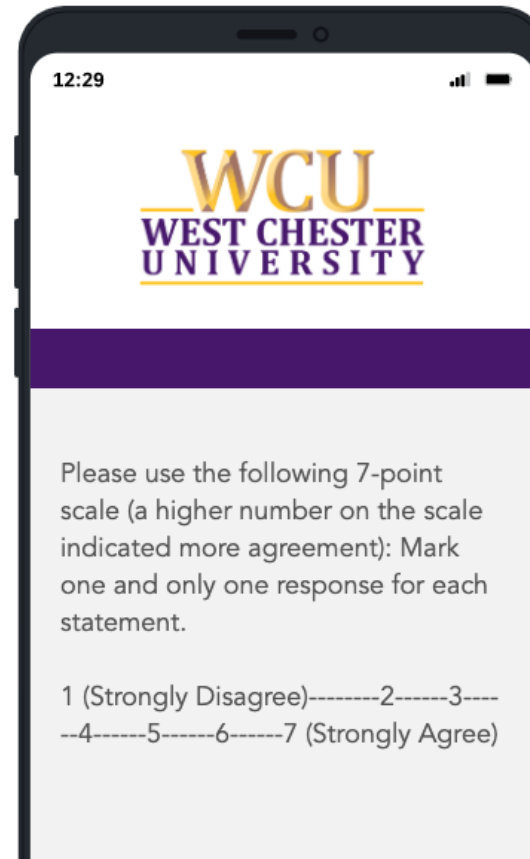
# Study Timeline



# Surveys: Phase One

---

- Jefferson Empathy Scale for Health Professions Students (JSE-HPS)
- Compassion Scale (CS)





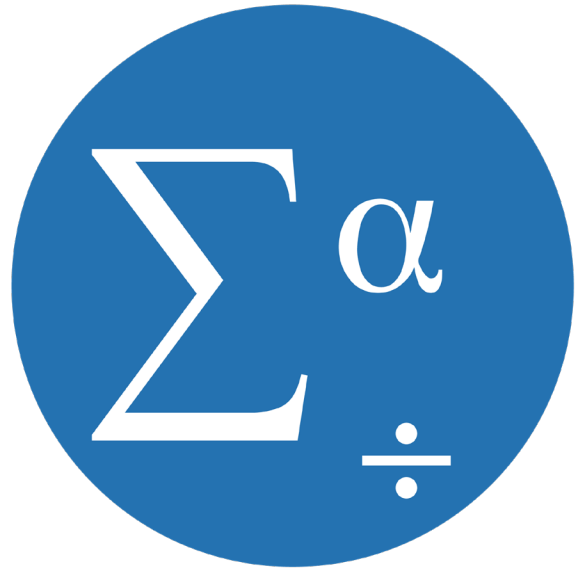
# Reflection Logs: Phase Two

1. Empathy is defined by Patel (2019) as, the ability to sense, feel, and understand another's emotions. Given that definition, describe one or more times when you demonstrated empathy during the past two weeks of your clinical experience.
2. Compassion is defined as an emotional response to another's pain or suffering involving an authentic desire to help (Patel, 2019). Given that definition, describe one or more times when you demonstrated compassion during the past two weeks of your clinical experience.
3. Given the pandemic, in what ways has your ability to provide patient centered care been influenced in the last two weeks?
4. Please describe your own well-being in the past two weeks.
5. Describe the ways in which your own well-being has influenced your ability to exhibit soft skills and provide patient centered care in the last two weeks of your clinical experience.
6. How frequently did you utilize the soft skills of empathy and compassion in the last two weeks?

# Semi-Structured Interview: Phase Two Embedded

---

1. Can you describe in your own words the definition of empathy?
2. Can you describe in your own words the definition of compassion?
3. Did [this class], specifically the lessons on compassion and empathy, influence you clinically?
  - If so, in what ways? If not, why do you think this was the case for you?
4. Talk to me about your clinical site. What does empathy and compassion look like at your clinical site?
  - Can you talk to me about a time when you demonstrated empathy/compassion at your clinical site?
  - Can you talk to be about a time when you observed your preceptor demonstrate empathy/compassion at your clinical site?
5. Do you think your own well-being is associated with the delivery of compassion and empathetic patient centered care? If so, how? If not, why not?
6. Given the pandemic can you talk to me about providing patient centered care during this time?



dedoose

# Data Analysis

- Quantitative
  - Repeated measure ANOVA with composite scores
- Qualitative
  - Constant comparative method of analysis
  - Thematic coding of reflection logs and semi-structured interviews

# Quantitative Results: Student Empathy Development During an Academic Semester

## *Empathy Composite Descriptive Statistics*

		Mean	SD
Empathy (JES- HPS)	Timepoint 1	108.5789	11.43735
	Timepoint 2	119.8947	9.23095
	Timepoint 3	117.1579	9.16675

## *Repeated Measure ANOVA Statistics*

Within Subjects Effect	<i>df</i>	Mean Square	F	<i>p</i>
Empathy	2	662.263	20.375	.000***

*Note.* \*Statistically significant at  $p < .05$ , \*\*\*Statistically significant at  $p < .001$

# Quantitative Results: Student Compassion Development During an Academic Semester

## *Compassion Composite Descriptive Statistics*

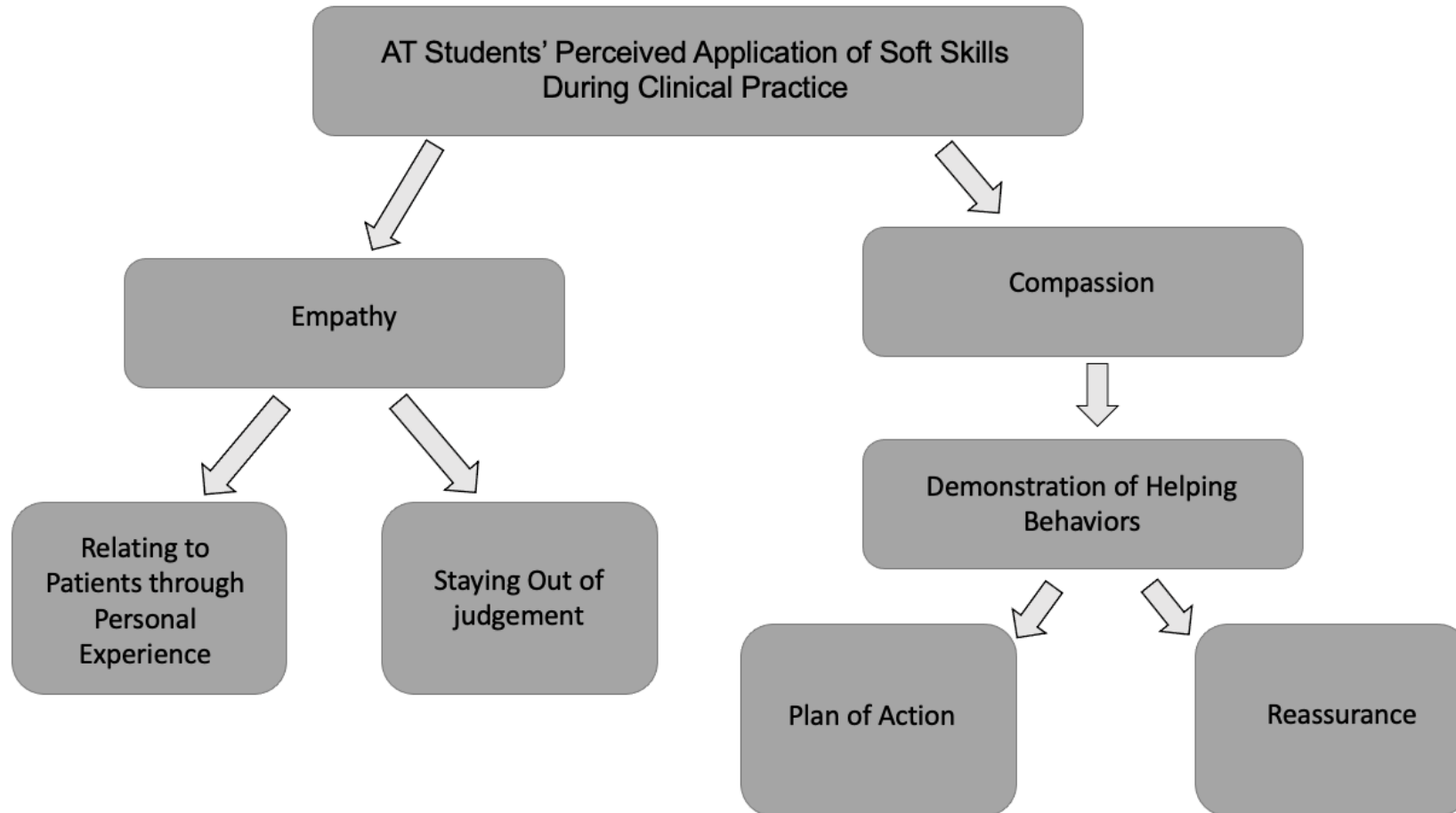
		Mean	SD
Compassion (CS)	Timepoint 1	60.2632	3.69447
	Timepoint 2	60.8947	4.61754
	Timepoint 3	62.0526	4.52737

## *Repeated Measure ANOVA Statistics*

Within Subjects Effect	<i>df</i>	Mean Square	F	<i>p</i>
Compassion	2	15.649	1.394	.261
Compassion Construct- Mindfulness	1	.421	.716	.408
Compassion Construct- Kindness	1	5.921	5.737	.028*
Compassion Construct – Common Humanity	1	1.684	1.422	.249

*Note.* \*Statistically significant at  $p < .05$ , \*\*\*Statistically significant at  $p < .001$

# Qualitative Results: Perceived Application of Soft Skills

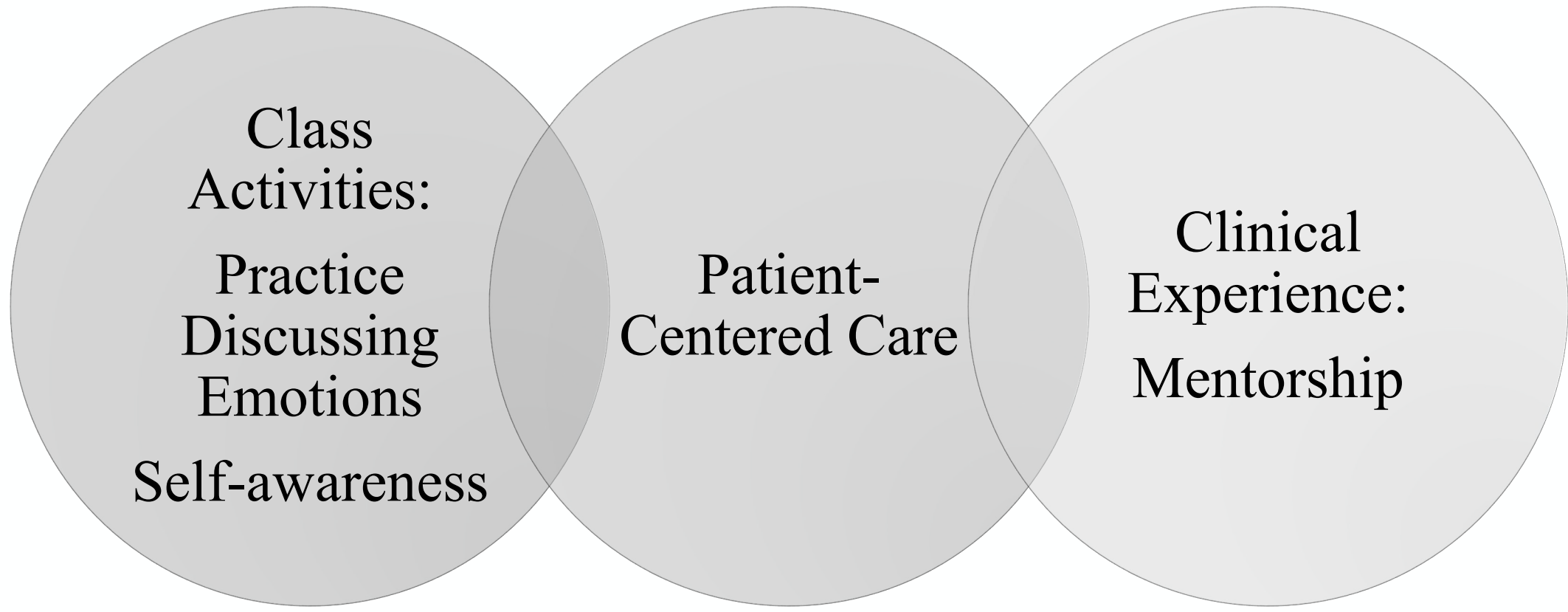






# Qualitative Results: Curriculum to Clinical Practice

---



# Qualitative Results: Patient-Centered Care During a Pandemic

Challenges
<ul style="list-style-type: none"><li>• Face masks made communication challenging</li><li>• Needed to rely on body language and non-verbal communication</li></ul>

Policy Changes
<ul style="list-style-type: none"><li>• Schedules Appointments</li><li>• “Due to the pandemic, I feel as though we are able to give better patient-centered care than before (from what I can imagine). Many of these are one-on-one sessions and there is more time to get to know the athlete as an individual and how these injuries are affecting their lives”</li></ul>

(Participant 5).

Altruism
<ul style="list-style-type: none"><li>• more understanding when interacting with their patients in order to provide patient-centered care (Participant 1)</li><li>• “We are all in this together and everyone’s situation is different, so it’s even more important to be considerate and kind in your care for others” (Participant 19).</li></ul>

# Qualitative Results: Students' Subjective Well-Being





# Qualitative Results: Emotional Response During Patient Care

Subjective Well-Being	Emotional Response During Patient Care	Example
Negative Emotions	Personal barriers that negatively impacted students' ability to build therapeutic relationships	“My own well-being has been absolutely taken away from my ability to care for others. I am riding the [struggle] bus this week and it is very hard for me to be my best, kindest, and most compassionate self when it feels like every aspect of my life is a stressor” (Participant 16).
Neutral Emotions	“Flip the Switch” – a phenomenon where despite mood a sense of purpose to be fully present to help support a patient is practiced	“I am very aware that I’m in a dumpy mood... if I’m at my clinical site and I am evaluating someone you kind of flip that switch so you take on a different role... as soon as the patient is gone or I’m done providing care in that instance I can very easily go back to my mood. I know how I would want to be treated and how I would want to be as a clinician, so I think having that goal of who I want to be as an athletic trainer... that is what reminds me to flip the switch” (Participant 19).
Positive Emotions	Positive emotions that influence partnership and reciprocity therapeutic relationships	“I have been making sure to take breaks and focus on me, my mental health, and well-being because I am of no use to my athletes if I am overwhelmed” (Participant 13).



# Discussion of Results



Curriculum Activities and Clinical Experiences



AT Students' Perceived Application of Soft Skills



Students' Subjective Well-Being and Emotional Response to Utilizing Soft Skills



How the Global Pandemic Influenced Patient-Centered Care

# Research Take Home Points

---

1. How is a pre-professional soft skills curriculum associated with students' development of empathy?
  - **Statistically significant findings support students' development of empathy  $F(2)= 20.38, p=.000$**
2. How is a pre-professional soft skills curriculum associated with students' development of compassion?
  - **Data analysis did not reveal statistical significance for students' development of compassion  $F(2)= 1.39, p=.261$**
3. In what ways do athletic training students perceive they transferred soft skills into clinical practice?
  - **Empathy: Relating to patients through lived experiences and staying out of judgement**
  - **Compassion: Demonstrating helping behaviors of creating a plan of action or providing reassurance**
4. In what ways are the development of soft skills associated with athletic training students' subjective well-being?
  - **Students reported subjective well-being mirrored their emotional response to utilizing soft skills during clinical practice**
5. How do athletic training students describe their emotional response to utilizing soft skills during clinical practice?
  - **Negative emotions- personal barriers, stress, being overwhelmed**
  - **Neutral emotions- “flip the switch”, helping others, kindness**
  - **Positive emotions- reciprocity, partnership**

# References

---

- Creswell, J.W., & Plano Clark, V.L. (2018). *Designing and conducting mixed methods research*. Sage Publications.
- Hojat, M. (2016). *Empathy in health professions education and patient care*. Springer.
- Joubert, P.M., Kruger, C., Bergh, A.M., Pickworth, G.E., Van Staden C.W., Roos, J.L., Schurink, W.J., Du Preez, R.R., Grey, S.V., & Lindeque, B.G. (2006). Medical students on the value of role models for developing 'soft skills' - "that's the way you do it." *South African Psychiatry Review*, 9, 28-32.
- Lamm, C., Decety, J., & Stinger T. (2011). Meta-analytic evidence for common and distinct neural networks associated with directly experienced pain and empathy for pain. *Neuroimage*, 54(3), 2492-502.
- Lown, B.A. (2016). A social neuroscience-informed model for teaching and practicing compassion in health care. *Medical Education*, 50, 332-342.
- Morgan, D. L. (2014). *Integrating qualitative and quantitative methods: A pragmatic approach*. Sage Publications.
- National Athletic Trainers' Association. (2011). *Athletic Training Education Competencies (5<sup>th</sup> ed)*. [https://www.nata.org/sites/default/files/competencies\\_5th\\_edition.pdf](https://www.nata.org/sites/default/files/competencies_5th_edition.pdf)
- Patel, S., Pelletier-Bui, A., Smith, S., Roberts, M.B., Kilgannon, H., Trzeciak, S., & Roberts, B.W. (2019). Curricula for empathy and compassion training in medical education: A systematic review. *PLOS ONE*, 14(8), 1-25. <https://doi.org/10.1371/journal.pone.0221412>
- Raab, S., Wolfe, B.D., Gould, T.E., Piland, S.G. (2011). Characterizations of a quality certified athletic trainer. *Journal of Athletic Training*, 46(6), 672-679.
- Trzeciak, S., & Mazzairelli, A. (2019). *Compassionomics: The revolutionary scientific evidence that caring makes a difference*. Studer Group.